SCHEDULE Rule 2

Form 1IN THE CROWN COURT IN NORTHERN IRELANDApplication for dismissal of transferred charge(s) under paragraph 4 of Schedule 1 to the Children's Evidence (Northern Ireland) Order 1995

Rule 4 and 5

This form may be used to give notice of intention to apply orally or in writing, for dismissal of transferred charge(s), for application to call witnesses or for an extension of time within which to apply. Applications for dismissal must be received by the Court within 14 days of the date on the Notice of Transfer.

A copy of this form and of any statements or documentary evidence on which the applicant relies must be served at the same time on the authority by or on behalf of whom the notice of transfer was given and on any other person to whom the notice of transfer relates.

## Case Details Enter the mane of the The Crown Court at Court shown on the Notice of Transfer Crown Court Case Number and the date of the Notice. Date of notice of transfer Applicant Surname: State name and address of the applicant to whom Forename(s): this application rotates. (If in custody Address: give address where detained). Date of Birth: Application Tick box as аруниризаце ☐ Notice of intention to apply orally for dismissal paragraph 4(3) of Schedule 1. □ Application to call witnesses in support of application for dismissal paragraph 4(4) of Schedule L. ☐ Application for extension of time within which to give notice of intention to make an oral application, Written application for dismissal. Application for extension of time within which to make a written application. If applying for an extension only you will need to submit a complete form in due course.

Specify all charges and indicate those to which this application applies.

(If applying only for an extension, you do not need to complete this section).

## Charges

## Grounds for applying

(a) Application for dismissal:

The evidence which has been disclosed would not be sufficient for a jury to properly convict.

(b) Application for extension of time.

If applying for an extension, state the grounds.

Witness(es) and material on which you rely (copies of all documents must be attached).

For oral applications indicate which witnesses you propose to caff, if leave is given. State the date of birth of each witness (or that he is 18 or uver). In relation to each witness under 18, you must also provide the additional information requested (paragraph 4(5) of Schedule 1)

Witness(es) under 18

Name:

Date of Birth:

Date of any video recording of the witness as is mentioned in Article 81A(2) of the Police and Criminal Evidence (Northern Ireland) Order 1989.

Is the witness the alleged victim or the alleged witness of the commission of the offence(s) charged?

Yes/No (delete as appropriate)

I confirm that none of the proposed witnesses is a child to whom paragraph 4(5) of Schedule 1 applies.

Signature of applica	mt			
Details of any perso	n signing on behalf of applicant			
Name:				
Solicitor:	<del></del>			
Address:				
Date:				
	WN COURT IN NORTHERN IRELAND Application by prosect pplication for dismissal	ıtion for oral		
	· <del>·</del>	Rule 5		
	This form may be used by the prosecution to apply for:			
	* an oral hearing of a defence application for dismissal;			
	<ul> <li>an application for leave to call witnesses; or</li> </ul>			
	<ul> <li>an extension of time within which to apply for (a) an oral hearing or (b) to submit documents.</li> <li>An application by the prosecution for an oral hearing, or for an extension of time within which to apply for an oral hearing, must be made within 7 days of receipt of notice of the defence application for dismissal. Written comments or material must be submitted to the chief clerk of the court within 14 days of the date of receipt of the defence application.</li> </ul>			
	A copy of this form must be given to the applicant for dismissal and to any other person to whom the application to dismiss relates.			
	Case Details			
	The Crown Court at			
Enter the name of the Court shown on the	Crown Court Case Number			
notice of transfer, and the date of receipt of the defence application.	Date of receipt of copy of defence application:			
	Defendant(s) Surname:			
	Forename(s):			
State the name(s) and address(es) of the defendant(s) to whom this application	Address:			
relates. If in custody, give address where detained.	Date of Birth:			

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	Application		
State the name, address and reference	Director of Public Pr	osecutions	
		Ref;	
Tick as appropriate	☐ Application for a	oral hearing.	
	Application for le of Schedule 1.	ave to call witnesses under paragraph 4(4)	
	Application for earl hearing.	stension of time within which to apply for	
	Application for e documents.	xtension of time within which to submit	
Specify all charges and indicate those to which the application for dismissal applies and those on which the prosecution intend to respond.	Charges		
	Grounds for apptyis	If.	
State fae grounds on which the application is being made.	diomas to apply	<del></del>	
Indicate which wimesses you propose to call, if leave is given.	Witness(es) for the	prosecution	
State the date of birth	Witness(es) under 1	8	
of each witness (or that he is 18 or over).	Name:		
bi relation to each	Date of Birth:		
witness under 18, you must also provide the additional information requested (paragraph 4(5) of Schedule 1)	Date of any video recording of the witness as is mentioned in Article 81A(2) of the Police and Criminal Evidence (Northern Ireland) Order 1989:		
	Is the witness the all commission of the o	eged victim or an alleged witness of the ffences charged:	
	Yes/No (delete as app	propriate)	
	I confirm that none of paragraph 4(5) of Sci	the proposed witnesses is a child to whom hodule 1 applies.	
Indicate any grounds on which it appears that the proposed witness for the defence is a child to whom paragraph 4(5) of Schedule 1 applies.	Witness(es) for defer	ce	
	Signature	Date	

Form 3IN THE CROWN COURT IN NORTHERN IRELANDNotification of Court's Determination on Applications under paragraph 4 of Schedule 1 to the Children's Evidence (Northern Ireland) Order 1995

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Rule 3

This form shall be used for notifying all parties of the court's determination of the following applications.

- \* by the prosecution for oral hearing of a defence application for dismissal;
- \* by defence or prosecution for leave to call witnesses;
- \* by the defence or prosecution for an extension of time within which to lodge an application for oral hearing; or
- \* by the prosecution for extension of time within which to submit material to the court.

Case Details				
The Crown Court at:				
Crown Court case number:				
Defendant(s)	Surname:			
	Forename(s):			
	Address:			
	(If in custody give address where detained)			
	Date of birth:			
Charges (indicate those to whi	ch the application applies)			
Nature of Application				
Application by prosecution for oral hearing of application for dismissal of transferred charge(s)				
<ul> <li>Defence*/Prosecution* application for leave to call witnesses (paragraph 4(4) of Schedule 1)</li> </ul>				
☐ Defence*/Prosecution* apparant application for oral heat	plication for extension of time within which to lodge- ring			
[ ] Prosecution application for extension of time within which to submit written comments on other material to the court				
*delete as appropriate.				
Court's Decision				
(Specify court's decision on each application considered. Where an application is refused the reasons for refusal should be stated where leave is granted to call witnesses, the court must be satisfied that none of the witnesses to be called is a child to whom paragraph $4(5)$ of Schedule 1 applies.)				
P:				
Signed	Dutu			
(an Officer of the Court)	Date			

Form 4IN THE CROWN COURT IN NORTHERN IRELANDNotification of the Court's determination of a written application for dismissal of transferred charge(s) under paragraph 4 of Schedule 1 Children's Evidence (Northern Ireland) Order 1995

**Status:** This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

			Rule 6
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Case Details			
The Crown Co	urt as:		
Crown Court c	ase number:		
Defendant(s)*	Surname:		
	Forename(s):		
	Address:		
	(If in custody give address where detained)		
	Date of Birth:		
Charges (those	on which dismissal v	vas sought to be separately identified)"	
reasons for refe		decision. Where an application is refused the Include details of any bail variations and counts	
Signed			
(an Officer of t	the Court)	Date	